

TRANSMITTAL FORM

Attorney Docket No.
RAL920000100US1
1945P

In re the application C. JEFFRIES, et al.

Confirmation No: 1702

Serial No: 09/753,965

Group Art Unit: 2661

Filed: January 3, 2001

Examiner: Kading, Joshua A.

For: **METHOD AND SYSTEM FOR PROVIDING AN OPTIMAL PATH CHOICE FOR
 DIFFERENTIATED SERVICES**

ENCLOSURES (check all that apply)

<input type="checkbox"/>	Amendment/Reply	<input type="checkbox"/>	Assignment and Recordation Cover Sheet	<input type="checkbox"/>	After Allowance Communication to Group
<input type="checkbox"/>	<input type="checkbox"/> After Final	<input type="checkbox"/>	Part B-Issue Fee Transmittal	<input checked="" type="checkbox"/>	Notice of Appeal
<input type="checkbox"/>	Information disclosure statement	<input type="checkbox"/>	Letter to Draftsman	<input type="checkbox"/>	Appeal Brief
<input type="checkbox"/>	<input type="checkbox"/> Form 1449	<input type="checkbox"/>	Drawings	<input type="checkbox"/>	Status Letter
<input type="checkbox"/>	<input type="checkbox"/> (X) Copies of References	<input type="checkbox"/>	Petition	<input checked="" type="checkbox"/>	Postcard
<input checked="" type="checkbox"/>	Extension of Time Request *	<input type="checkbox"/>	Fee Address Indication Form	<input type="checkbox"/>	Other Enclosure(s) (please identify below):
<input type="checkbox"/>	Express Abandonment	<input type="checkbox"/>	Terminal Disclaimer		
<input type="checkbox"/>	Certified Copy of Priority Doc	<input type="checkbox"/>	Power of Attorney and Revocation of Prior Powers		
<input type="checkbox"/>	Response to Incomplete Appln	<input type="checkbox"/>	Change of Correspondence Address		
<input type="checkbox"/>	Response to Missing Parts	*Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for <u>one (1) month</u> , from <u>May 4, 2005</u> , to <u>June 4, 2005</u> .			
<input type="checkbox"/>	<input type="checkbox"/> Executed Declaration by Inventor(s)				

CLAIMS

FOR	Claims Remaining After Amendment	Highest # of Claims Previously Paid For	Extra Claims	RATE	FEE
Total Claims	0	0	0	\$ 50.00	\$ 0.00
Independent Claims	0	0	0	\$200.00	\$ 0.00
Total Fees					\$ 0.00

METHOD OF PAYMENT

<input checked="" type="checkbox"/>	Check no. <u>8828</u> in the amount of \$ <u>120.00</u> is enclosed for payment of extension fees.
<input checked="" type="checkbox"/>	Charge \$ <u>500.00</u> to Deposit Account No. <u>50-0563</u> (IBM Corporation) for payment of Notice of Appeal fees.
<input checked="" type="checkbox"/>	Charge any additional fees or credit any overpayment to Deposit Account No. <u>50-0563</u> (IBM Corporation)

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Attorney Name	Janyce R. Mitchell, Reg. No. 40,095
Signature	/Janyce R. Mitchell/ Reg. No. 40,095 Janyce R. Mitchell
Date	May 26, 2005

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop AE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on May 26, 2005	
Type or printed name	Irena Nikolova
Signature	<i>Irena Nikolova</i>

06/01/2005 RAL920000100 09753965

120.00 0P

01 FC:1251